

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90159 045 ***150.00

DOCUMENT # K96926

1. Entity Name **DAN K INC**
6822 SW 7 STREET
MARGATE, FL 33068

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
7712 W Oakland Pk Blvd

3. Mailing Address
7712 W Oakland Pk Blvd

DO NOT WRITE IN THIS SPACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Sunrise FL

City & State
Sunrise FL

4. FEI Number **65-0136360**

Applied For
Not Applicable

Zip **33351**

Country **USA**

Zip **33351**

Country **USA**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name **Khalid Ali**

Street Address (P.O. Box Number is Not Acceptable)

6822 SW 7 Street

City **Margate**

FL Zip Code **33068**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	P.
NAME	Ali, Khalid
STREET ADDRESS	6822 SW 7 Street
CITY - ST - ZIP	Margate FL 33068
TITLE	T.
NAME	Ali, Zohairu
STREET ADDRESS	6822 SW 7 Street
CITY - ST - ZIP	Margate, FL 33068
TITLE	V.
NAME	Daharry, Dhanraj
STREET ADDRESS	6755 SW 7 Street
CITY - ST - ZIP	Margate, FL 33068
TITLE	S.
NAME	Daharry, Fareed
STREET ADDRESS	6755 SW 7 Street
CITY - ST - ZIP	Margate, FL 33068
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: **Dhanraj Daharry**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/02

Date

9549685434

Daytime Phone #

CR200348 (12/01)